PSYCHOTROPIC MEDICATIONS What Every Counselor Should Know

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BENEFITS OF PSYCHOTROPIC MEDICATIONS

- Assists with biologically-based disorders
- Decreases negative symptoms
- Increases functioning
- Increases effectiveness of other approaches
- Cost-effective

KEY INFORMATION

- Generic and Brand Names
- Purpose of Medication
- Usual Dose and Frequency
- Potential Side Effects
- Emergency Conditions
- Cautions

PSYCHOTROPIC MEDICATION CATEGORIES

- Antipsychotics/Neuroleptics
- Antimanic Medications
- Antidepressant Medications
- Antianxiety Medications
- Stimulant Medications
- Narcotic and Opioid Analgesics
- Antiparkinsonian Medications
- Hypnotics

GENERIC AND BRAND NAMES

- Name brand medications have a limited patent
- When the patent expires, the medication may be made as a generic
- The generic name of a medication is the <u>actual name of the drug and</u> <u>never changes</u>

DRUG VARIATIONS

- Manufacturers can make many forms of a single drug with only slight variations
 - Extended Release (CR, ER, SR and XR)
 - Quick dissolving tablets taken without water (Remeron Sol Tab, Zyprexa Zydis)

ANTIPSYCHOTICS/NEUROLEPTICS

- Treats psychotic symptoms from schizophrenia (severe depression or bipolar illness)
- Psychotic symptoms include being out of touch with reality, hearing voices, having untrue ideas
- Work against the symptoms to stop them or make them milder
- Have a mood stabilizing effect (bipolar disorder) and can also, in low doses, be effective in relieving anxiety

ANTIMANIC MEDICATIONS

- Used to control the mood swings of bipolar (manic-depressive) illness
- Can even out the mood swings to decrease some of the suicidal and other self-harm behaviors seen with bipolar disorders
- Mania, if left untreated, may worsen into a psychotic state
- Depression, untreated, may result in thoughts of suicide

ANTIDEPRESSANT MEDICATIONS

- Used for moderate to serious depression, also helpful for milder depressions (dysthymia)
- Must be taken for 3-4 weeks to reduce or alleviate symptoms of depression
- Used for a minimum period of 9 to 12 months
- Types of antidepressants
 - Tricyclic and quatracyclics
 - Monamine Oxidase Inhbitors (MAO)
 - Selective Serotonin Reuptake Inhibitors (SSRIs)

ANTIANXIETY MEDICATIONS

- Calm, relax and decrease symptoms (generalized anxiety disorder, posttraumatic stress disorder, panic, phobia, and obsessive compulsive disorders)
 - Benzodiazepines: fast acting, depressant effect on the central nervous system
 - Beta-blockers: reduce the flight/fight response
 - Inderal: occasionally prescribed for performance anxiety (non-addictive)
 - Antihistamines (Atarax/Vistaril): use drowsiness side effect to calm and relax
 - BuSpar works thru serotonin system to induce calm (effective after 3-4 weeks dosage)

STIMULANT MEDICATIONS

- Used to treat Attention Deficit/ Hyperactivity Disorder (ADHD), typically diagnosed in childhood but also occurs in adults.
- ADHD exhibits with short attention span, excessive activity, impulsivity, and emotional development below that expected for person's age.
- Can also be used to treat narcolepsy, obesity, and sometimes, depression.

NARCOTIC AND OPIOID ANALGESICS

- Used to control acute pain this is moderate to severe.
- Normally used for acute pain and for a short time – as they can become addictive. (exception is pain related to cancer).
- Methadone is a synthetic opioid used in heroin detoxification programs and to maintain sobriety from heroin addiction.

ANTIPARKINSONIAN MEDICATIONS

- Used to counteract the side effects of antipsychotic drugs.
- Called antiparkinsonian as the neurological side effects of the antipsychotic medications act similar to the symptoms of Parkinson's disease.

HYPNOTICS

- Used to help a person with sleep disturbances get restful sleep
- Lack of sleep is one of the greatest problems faced by persons with chemical dependency and psychiatric illnesses (lack of sleep can increase mood changes, irritability, and psychiatric symptoms).

YOUR ROLE

- If you feel the person you are working with would benefit from psychotropic/psychotherapeutic medications:
 - Discuss with your Supervisor
 - Make referral to Psychiatrist



- 1. Recent change in medical condition that has not been assessed by their Primary Care Physician (PCP)
- 2. Symptoms of withdrawal from drugs or alcohol (sweating, shaking, pale pasty skin, lethargy)



- 3. Acute change in mental status
- 4. Evidence of inability to care for self (malnourished, dehydrated, dirty, malodorous, risk of exposure to elements)
- 5. Evidence of recent sexual or physical abuse that has not been evaluated



- 6. Suggestions of serious side effects to medications
- 7. Acknowledged or observed suggestions of suicidality or homicidality